

depend upon inversion of eyelashes or trichiasis. It was a case of real trichiasis, not before described, and probably not before noticed. I at least had not met with any such notice in the books.

I directed the offending hairs to be gradually eradicated by tweezers, which the lady's nurse accomplished after some days, and the patient was thus cured of an *incurable disorder*.

Now, my dear sir, our patient is in precisely a similar condition, both as to the distress and the cause of that distress; and I confidently expect that if she will accomplish the eradication of the offending lashes, "whose name is legion," she will find herself delivered from the annoyance.

You, who know as well as I do, how obstinate and how intractable are many of the cases of pruritus, will do, I think, a service to many distressed people, and shed a little beam of light on the path of many a bewildered colleague if your widely known journal should assist to spread this little item of useful knowledge where my work has not been able to extend it.

I am, dear Doctor,

With the truest esteem,

Your obliged servant,

CH. D. MEIGS.

710 Walnut St., Jan. 28, 1862.

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ART. IV.—*Induction of Premature Labour*. By C. D. MEIGS, M. D.,  
Emeritus Prof. of Midwifery in Jefferson Medical College. In a letter  
to the Editor.

DEAR SIR: I am not rarely consulted by medical gentlemen at a distance on the subject of premature labour and on forced abortion supposed to be rendered necessary by an ascertained deformity of the pelvis. Having had two such letters to answer this week, I considered that it might comport with the purposes of your excellent journal to say in it what appears to me to be the most advisable method in such cases. If you should publish this note it might not only prove acceptable to some of your readers, but it would save my time, in the way of answering inquiries.

Dr. Karl Braun, of Vienna, proposed, a few years ago, to open the os uteri by means of what he called a COLPEURYNTER, which is a small delicate bag or bladder composed of vulcanized rubber, to which is attached a syringe and a stop. This bladder, not bigger than a walnut, if introduced within the vagina, may be distended by means of the syringe with tepid water or air. It may be inflated or distended so as to become equal in size to a small foetal head, and if the distension be gradually and very slowly effected it will not necessarily produce any distressing or painful sensation.

Now, as the uterine extremity of the vagina arises from the outer circumference of the cervix uteri, it is clear that such a distension as above supposed could not fail after due time to draw the walls of the cervical canal outwards, and so diminish the antagonism of the cervix and os uteri to that of the fundus and corpus uteri. This very condition of lessened resistance is all that is requisite in the case, because, as soon as the power of the fundus and body becomes preponderant, it will begin to force the ovum downwards, and at length, after dilating the cervix and os, expel it. I apprehend the method to be in all cases infallible—the condition being that the colpeuryesis shall be properly effected.

To bring on a forced abortion in labour by the use of the stilette, or by injecting different medicinal articles or gases into the gravid womb, appears to me to be an encroachment, by medical people, upon those rules of art within whose sacred pale we may be held blameless, whereas, we are not without blame when we transcend those barriers that are so clearly defined in our collegiate diplomas. Witness the instant death that recently occurred at Edinburgh, from injecting carbonic acid into the uterus, as related in your last number! But to gently remove the retaining power of the os and cervix by a moderate and reasonable colpeuryesis, is really to do no violence to any tissue, the operation being merely to suspend an antagonistic force, thus rendering the method of colpeuryesis the simplest and safest possible, and certainly unailing in success.

Inasmuch as operations performed for the induction of premature labour, and of abortion, are not without risk to the patient; and as it is well known that there are wretches who are so abandoned as to desecrate the profession of medicine, and spurn their own honor in the low calling *teneros avellere fœtus*, I conclude that no regular and reputable member of the body will ever consent to institute such operations as this I propose, without the consent of a proper medical consultation: this is a matter of such great import to us all, that I consider it to be incumbent on the American Medical Association to take such order upon it as their wisdom may suggest. To lose a patient under any circumstances, is a source of grief to the practitioner; but to lose one subjected, without consultation, to the operation in question, can only be fitly denoted as a disaster. Our diplomas endow us with authority to practise within the rules of an art—and it ought to be enacted as a rule of practice not to do these things without consent of a consultation. Such a rule would probably restrain much looseness of conduct on the part of some of the brethren; and might go even so far as to improve their morals, as is the admitted tendency of all salutary laws. I trust that you, Mr. Editor, who are a leader in things practical and æsthetical in our calling, will readily agree with me that it is neither safe nor decent for any single physician to order and perform one of these operations. Such sentiments, if known to be held by your great and powerful press, would do more good, perhaps, in the way of purging our brotherhood

from these defilements, than half a dozen convictions and sentencings by the law courts.

Though I have already drawn out this note to a greater length than I designed, I ought not to omit the injunction of deferring the operation until after the period during which the ovum is covered up completely within its capsule called the decidua. Now, it is known that the whole ovum escapes from its deciduous investment or capsule at the one hundred and fifth day, or thereabout. If one would force on an abortion before that date, the deciduous capsule, which consists of the tubular glandular mucous membrane of the womb, must inevitably be ruptured or wounded, which is equal to a wound of the womb itself; but, after three and a half months the ovum, which is at that period wholly escaped from the decidua-capsule, may reasonably be expected by means of the colpeuryxis to be expelled whole and unbroken, in which case the risk to the woman is much diminished, not only because the entire product of the conception is thus eliminated, but also because no needless and hazardous violence is done to the membrana decidua.

I am, my dear sir,

With the sincerest regard,

Your friend and servant,

CH. D. MEIGS.

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ART. V.—*On the Treatment of Variola.* By CHRISTOPHER J. CLEBORNE, M. D., Ass. Surg. U. S. N.

DURING the early part of 1861, having a number of cases of smallpox under my care, I had a fair opportunity of testing the efficacy of the general plan of treatment recommended in this paper. Most of the cases occurred in the southern portion of the city, and amongst the poorest class of people, the greater number of whom, owing to the present unfortunate troubles of the country, were unable to obtain employment, and in consequence lived in the greatest state of destitution. I mention this fact to show that in many instances the chances of recovery were considerably lessened, and even after the disease had run its course, convalescence was necessarily retarded from a want of proper food and attention. Notwithstanding these disadvantages, out of forty-three cases of confluent variola treated by the administration internally of the chlorate of potassa, and the local application of the plasma potassii iodidi, but three cases terminated fatally. It may be well to state here, that of thirty seven cases of which the writer took notes, six had been previously vaccinated, and the scars were still visible.